Recipient Committee Campaign Statement (Government Code Sections 84200-84216.5)	Type or print in i	Type or print in ink.			CALIFORNIA 2001/02 FORM		
	Statement covers period from _01/01/2017	Date of election if applicable: (Month, Day, Year)		Page	e 1 of 27 For Official Use Only		
SEE INSTRUCTIONS ON REVERSE	through_06/30/2017						
1. Type of Recipient Committee: All Committee	tees - Complete Parts 1,2,3, and 4.	2. Type of Stateme	nt:				
 Officeholder, Candidate Controlled Committee State Candidate Election Committee Recall (Also Complete Part 5.) General Purpose Committee Sponsored Small Contributor Committee Political Party/Central Committee 	Ballot Measure Committee Primary Formed Controlled Sponsored (Also Complete Part 6.) Primary Formed Candidate/ Officeholder Committee (Also Complete Part 7.)	Pre-election Staten Semi-annual Staten Termination Staten Amendment (Explated Amendment TO UPDA'S PONSOR, INCLUDE ADIE, AND ADDITIONAL ACCEPTED.	ment nent ain below) TE PAYMENT OF PAC . DITIONAL PAYMENT N	Special Suppler Statemo	rly Statement Odd-Year Report mental Preelection ent - Attach Form 495 IVE SERVICES BY		
3. Committee Information	I.D.NUMBER 1352944	Treasurer(s)					
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE BAKERSFIELD CHAMBER OF COMMERCE POLITICAL ACT		NAME OF TREASURER NICHOLAS ORTIZ					
STREET ADDRESS (NO P.O. BOX)		MAILING ADDRESS					
CITY STATE ZIP COD BAKERSFIELD CA 93301 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BC	(661)327-4421	CITY BAKERSFIELD NAME OF ASSISTANT TREASUR JEAN SCHEIBER	STATE CA RER, IF ANY	ZIP CODE 93301	AREA CODE/PHONE 661-327-4421		
CITY STATE ZIP COD BAKERSFIELD CA 93301	DE AREA CODE/PHONE	MAILING ADDRESS					
OPTIONAL: FAX/E-MAIL ADDRESS 661-327-8751 / nortiz@bakersfieldchamber.org		CITY BAKERSFIELD OPTIONAL: FAX/E-MAIL ADDRES	STATE CA	ZIP CODE 93301	AREA CODE/PHONE (661) 327-4421		
Executed on By By By	SIGNATURE OF TREASURER OR NTROLLING OFFICEHOLDER, CANDIDATE, STAT SIGNATURE OF CONTROLLING OFFICEHOLDER	best of my knowledge the informornia that the foregoing is true an assistant treasurer TE MEASURE PROPONENT OR RESPONSIBLE R, CANDIDATE, STATE MEASURE PROPONEN	nation contained here nd correct. E OFFICER OF SPONSOR	1	FPPC Form 460 (June/01)		
DATE	SIGNATURE OF CONTROLLING OFFICEHOLDER	R, CANDIDATE, STATE MEASURE PROPONEN	IT I	-FFC TOII-FFEE	Helpline: 866/ASK-FPPC State of California		

CALIFORNIA 460

FORM **FOU**Page ² of ²⁷

Recipient Committee
Campaign Statement
Cover Page - Part 2

Officeholder or Candidate Controlled	Committee	6. Ballot Measure	Committee			
NAME OF OFFICEHOLDER OR CANDIDATE		NAME OF BALLOT MEAS	JRE			
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRIC	T NUMBER IF APPLICABLE)	BALLOT NO. OR LETTER	JURISDICTI	ON		SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	ITY STATE ZIP	Identify the controlling	officeholder, can	didate, or state me	asure propo	onent, if any.
		NAME OF OFFICEHOLDE	R, CANDIDATE, OR P	ROPONENT		
Related Committees Not Included in this Sta not included in this statement that are controlled by you or are contributions or to make expenditures on behalf of your candid	primarily formed to receive	OFFICE SOUGHT OR HEI	.D	DIS	STRICT NO. IF	FANY
COMMITTEE NAME	I.D.NUMBER	7. Primarily Formo		e List names of o	fficeholder(s)	or candidate(s) Ffor
NAME OF TREASURER	CONTROLLED COMMITTEE?	NAME OF OFFICEHOLDE	R OR CANDIDATE	OFFICE SOUGHT	OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)		NAME OF OFFICEHOLDE	R OR CANDIDATE	OFFICE SOUGHT	OR HELD	SUPPORT
CITY STATE ZIP C	CODE AREA CODE/PHONE					OPPOSE
COMMITTEE NAME	I.D.NUMBER	NAME OF OFFICEHOLDE	R OR CANDIDATE	OFFICE SOUGHT	OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE?	NAME OF OFFICEHOLDE	R OR CANDIDATE	OFFICE SOUGHT	OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)						
CITY STATE ZIP C	CODE AREA CODE/PHONE	•	Attach continuation	n sheets if necessa	ary	

Campaign Disclosure Statement Summary Page

Type or print in ink.

Amounts may be rounded to whole dollars.

 $\begin{array}{c} \text{Statement covers period} \\ \text{from} \quad \underline{01/01/2017} \\ \text{through} \quad \underline{06/30/2017} \\ \end{array} \quad \begin{array}{c} \text{CALIFORNIA} \quad \textbf{460} \\ \text{FORM} \\ \end{array} \quad \text{of} \quad \underline{27} \\ \end{array}$

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

BAKERSFIELD CHAMBER OF COMMERCE POLITICAL ACTION COMMITTEE

I.D. NUMBER 1352944

SUMMARY PAGE

Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections			
1. Monetary Contributions Schedule A, Line 3	\$26,110.00	\$26,110.00	Concrat Elections			
2. Loans Received Schedule B, Line 7	\$0.00	\$0.00	1/1 through 6/30 7/1 to Date			
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$26,110.00	\$26,110.00	20. Contribution Received \$.00 \$.00			
4. Nonmonetary Contributions Schedule C, Line 3	\$0.00	\$0.00	24 Evpanditura			
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$26,110.00	\$26,110.00	21. Expenditures			
Expenditures Made			Expenditure Limit Summary for State			
6. Payments Made Schedule E, Line 4	\$32,109.34	\$32,109.34	Candidates			
7. Loans Made Schedule H, Line 7	\$0.00	\$0.00	22. Cumulative Expenditures Made*			
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$32,109.34	\$32,109.34	(If Subject to Voluntary Expenditure Limit)			
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	\$5,280.00	\$5,280.00	Date of Election Total to Date			
10. Nonmonetary Adjustment Schedule C, Line 3	\$0.00	\$0.00	(mm/dd/yy)			
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$37,389.34	\$37,389.34				
Current Cash Statement						
12. Beginning Cash Balance Previous Summary Page, Line 16	\$46,544.66	To calculate Column B, add amounts in Column A to the				
13. Cash Receipts Column A, Line 3 above	\$26,110.00	corresponding amounts				
14. Miscellaneous Increases to Cash Schedule I, Line 4	\$19.34	from Column B of your last report. Some amounts in				
15. Cash Payments Column A, Line 8 above	\$32,109.34	Column A may be negative				
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$40,564.66	figures that should be subtracted from previous				
If this is a termination statement, Line 16 must be zero.		period amounts. If this is the first report being filed				
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$0.00	for this calendar year, only carry over the amounts				
Cash Equivalents and Outstanding Debts		from Lines 2, 7, and 9 (if any).	*Since January 1, 2001. Amounts in this section may be			
18. Cash Equivalents See instructions on reverse	\$0.00	-	different from amounts reported in Column B.			
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$5,280.00	-	FPPC Form 460 (June/01 FPPC Toll-Free Helpline: 866/ASK-FPPC			

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Schedule A Monetary Contributions Received

Type or print in ink.
Amounts may be rounded

SCH	IEDU	LE A
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Monetary Contributions Received			nts may be rounded whole dollars.	Statement cov	7	CALIFORNIA 460 FORM	
SEE INSTRUCTIO	NS ON REVERSE			through 06/30/201	7	Page <u>4</u>	of_27
NAME OF FILER BAKERSFIELD (CHAMBER OF COMMERCE POLITICAL ACTION COMMITTEE					I.D. Nur 1352944	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
4/25/2017	CALIFORNIA REAL ESTATE POLITICAL ACTION COMMITTEE - CALIFORNIA ASSOCIATION OF REALTORS Los Angeles, CA 90020 Committee ID: 890106 Memo Reference: INC238	IND COM OTH PTY SCC		\$5,000.00	\$7,500.00		
5/24/2017	CHEVRON CORPORATION AND ITS SUBSIDIARIES / AFFILIATES SAN RAMON, CA 94583 Memo Reference: INC260	IND COM OTH PTY SCC		\$7,300.00	\$12,500.00		
5/24/2017	CHEVRON CORPORATION AND ITS SUBSIDIARIES / AFFILIATES SAN RAMON, CA 94583 Memo Reference: INC261	IND COM OTH PTY SCC		\$5,200.00	\$12,500.00		
6/13/2017	CALIFORNIA REAL ESTATE POLITICAL ACTION COMMITTEE - CALIFORNIA ASSOCIATION OF REALTORS Los Angeles, CA 90020 Committee ID: 890106 Memo Reference: INC268	IND COM OTH PTY SCC		\$2,500.00	\$7,500.00		
		IND COM OTH PTY SCC					
			SUBTOTA	L \$20,000.00			
. Amount red	A Summary ceived this period - contributions of \$100 or more. I Schedule A subtotals.)			520,000.00	INE		
	ceived this period - unitemized contributions of less that the contributions received this period.	nan \$100		\$6,110.00	PT	H - Other Y - Politica	
	1 and 2. Enter here and on the Summary Page, Col	umn A, Line 1	.)TOTAL	\$26,110.00	50		Form 460 (IIINE/01)

Schedule B – Part 1 Loans Received

Type or print in ink.
Amounts may be rounded

|--|

Statement covers period

Loans Received			ounts may be rou to whole dollars.		from 01/01/2017	•	FORM 460		
SEE INSTRUCTIONS ON REVERSE					through	017	Page _5	of <u>27</u>	
NAME OF FILER							I.D. NUMBER		
BAKERSFIELD CHAMBER OF COMMERCE POL	TICAL ACTION COMMITTEE						1352944		
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE	
				PAID				CALENDAR YEAR	
				FORGIVEN		RATE		PER ELECTION**	
☐IND ☐COM☐OTH☐PTY☐SCC					DATE DUE		DATE INCURRED		
				PAID				CALENDAR YEAR	
				FORGIVEN		RATE		PER ELECTION**	
☐IND ☐COM☐OTH☐PTY☐SCC					DATE DUE		DATE INCURRED		
				PAID				CALENDAR YEAR	
				FORGIVEN		RATE		PER ELECTION**	
☐IND ☐COM☐OTH☐PTY☐SCC					DATE DUE		DATE INCURRED		
		SUBTOTALS							
Schedule B Summary 1. Loans received this period (Total Column (b) plus unitemized loans	less than \$100.)						Enter (e) on Schedule E, Line 3)		
2. Loans paid or forgiven this period (Total Column (c) plus loans under \$100 (Include loans paid by a third party that) paid or forgiven.)	dule A.)					* Amounts forgi another party a reported on Sch	ven or paid by lso must be nedule A.	
3. Net change this period. (Subtract Line Enter the net here and on the Summary					Net	ative number)	** If required.		
*Contributor Codes IND-Individual COM-Recipient Committee (committee)	ther than PTY or SCC)	OTH-Other PT	Y-Political Party	SCC-Small Cor	tributor Committee	FPPC 1	FPPC For Toll-Free Helpline	m 460 (June/01) : 866/ASK-FPPC	

Schedule B - Part 2 Loan Guarantors

Type or print in ink. Amounts may be rounded to whole dollars.

	SCHEDULE B - PART 2
Statement covers period	CALIFORNIA 460
from <u>01/01/2017</u>	FORM TOO
through <u>06/30/2017</u>	Page <u>6</u> of <u>27</u>

SEE INSTRUCTIONS ON REVERSE				through <u>06/30/2017</u>		Page <u>6</u>	of 27
NAME OF FILER BAKERSFIELD CHAMBER OF COMMERCE POLITIC	AL ACTION COMM	MITTEE				I.D. Numbe 1352944	er
FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	LOAN	AMOUNT GUARANTEED THIS PERIOD	CUMULA TO DA		BALANCE OUTSTANDING TO DATE
	☐ IND ☐ COM		LENDER		CALENDAR	YEAR	
	OTH PTY SCC		DATE		PER ELEC (IF REQUIF	TION RED)	
	☐ IND ☐ COM		LENDER		CALENDAR	YEAR	
	OTH PTY SCC		DATE		PER ELEC (IF REQUIF	TION RED)	
	☐ IND ☐ COM		LENDER		CALENDAR	YEAR	
	OTH PTY SCC		DATE		PER ELEC (IF REQUIF	TION RED)	
			LENDER		CALENDAR	YEAR	
	☐ COM ☐ OTH ☐ PTY ☐ SCC		DATE		PER ELEC (IF REQUIF	TION RED)	

FPPC Form 460 (JUNE/01) FPPC Toll-Free Helpline: 866/ASK-FPPC

Enter on Summary Page, Line 17 only.

Schedule C Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded to whole dollars.

	SCHEDULE C
Statement covers period	CALIFORNIA 460
from 01/01/2017	FORM TOO
through $\underline{06/30/2017}$	Page <u>7</u> of <u>27</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

BAKERSFIELD CHAMBER OF COMMERCE POLITICAL ACTION COMMITTEE

I.D. Number 1352944

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF DS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)	
1/31/2017	GREATER BAKERSFIELD CHAMBER OF COMMERCE BAKERSFIELD, CA 93303	☐ IND ☐ COM ■ OTH ☐ PTY ☐ SCC		PAYMENT OF PAC	\$2,049.75	\$9,473.40		
2/28/2017	GREATER BAKERSFIELD CHAMBER OF COMMERCE BAKERSFIELD, CA 93303	□ IND □ COM ■ OTH □ PTY □ SCC		PAYMENT OF PAC	\$509.65	\$9,473.40		
3/31/2017	GREATER BAKERSFIELD CHAMBER OF COMMERCE BAKERSFIELD, CA 93303	□ IND □ COM ■ OTH □ PTY □ SCC		PAYMENT OF PAC	\$1,149.00	\$9,473.40		
4/30/2017	GREATER BAKERSFIELD CHAMBER OF COMMERCE BAKERSFIELD, CA 93303	□ IND □ COM ■ OTH □ PTY □ SCC		PAYMENT OF PAC	\$367.50	\$9,473.40		
Attach add	Attach additional information on appropriately labeled continuation sheets. SUBTOTAL \$9,473.40							

Schedule C Summary

1. Amount received this period - nonmonetary contributions of \$100 or more.		*Contributor Codes
(Include all Schedule C subtotals.)	\$0.00	IND - Individual
2. Amount received this period - unitemized nonmonetary contributions of less than \$100	\$0.00	COM- Recipient Committee (other than PTY or SCC) OTH - Other
3. Total nonmonetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.)		PTY - Political Party SCC - Small Contributor Committee

Schedule C Nonmonetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.			Statement covers period			CALIFORNIA 460	
SEE INSTRUC	TIONS ON REVERSE				fror	ough <u>06/30/2017</u>		Page 8	of 27
NAME OF FILE		COMMITTEE						I.D. Numb 1352944	per
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION DS OR SERV		AMOUNT/ FAIR MARKET VALUE	CUMULA DA CALENDA (JAN 1 -	TE AR YEAR	PER ELECTION TO DATE (IF REQUIRED)
5/31/2017	GREATER BAKERSFIELD CHAMBER OF COMMERCE BAKERSFIELD, CA 93303	□ IND □ COM ■ OTH □ PTY □ SCC		PAYMENT OF PA	С	\$5,000.50	\$9,473.40		
6/30/2017	GREATER BAKERSFIELD CHAMBER OF COMMERCE BAKERSFIELD, CA 93303	□ IND □ COM ■ OTH □ PTY □ SCC		PAYMENT OF PA	С	\$397.00	\$9,473.40		
		IND COM OTH PTY SCC							
		IND COM OTH PTY SCC							
Attach ad	ditional information on appropriately label	ed continuation	sheets.	SUBT	OTAL	\$9,473.40			

Schedule C Summary

1. Amount received this period - nonmonetary contributions of \$100 or more.	*Contributor Codes
(Include all Schedule C subtotals.)	IND - Individual
2. Amount received this period - unitemized nonmonetary contributions of less than \$100	COM- Recipient Committee (other than PTY or SCC) OTH - Other
3. Total nonmonetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.)	PTY - Political Party SCC - Small Contributor Committee

Type or print in ink.

Amounts may be rounded to whole dollars.

	SCHEDULE D
Statement covers period	CALIFORNIA 160
from01/01/2017	FORM 400
through $06/30/2017$	Page 9 of 27
	LD NIIMDED

SEE INSTRUCTIONS ON REVERSE through 06/30/2017 Page 9

NAME OF FILER
BAKERSFIELD CHAMBER OF COMMERCE POLITICAL ACTION COMMITTEE

1352944

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
/19/2017	Payee Name: BRUCE (IE) FREEMAN Candidate Name: BRUCE FREEMAN City Council Member District 5 Jurisdiction: CITY OF BAKERSFIELD Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	MAILER	\$5,113.86	\$18,046.56	2017S: \$6,179.49
/19/2017	Payee Name: BRUCE (IE) FREEMAN Candidate Name: BRUCE FREEMAN City Council Member District 5 Jurisdiction: CITY OF BAKERSFIELD Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	DIGITAL AD DESIGN	\$150.00	\$18,046.56	2017S: \$6,179.49
/19/2017	Payee Name: BRUCE (IE) FREEMAN Candidate Name: BRUCE FREEMAN City Council Member District 5 Jurisdiction: CITY OF BAKERSFIELD Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	DESIGN FOR MAILER	\$750.00	\$18,046.56	2017S: \$6,179.49

Schedule D Summary

1. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.)	\$24,746.56
2. Unitemized contributions and independent expenditures made this period of under \$100	\$0.00
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.)	\$24,746.56

Type or print in ink.

Amounts may be rounded to whole dollars.

	SCHEDULE D (CONT.)
Statement covers period	CALIFORNIA 160
from01/01/2017	FORM 400
through <u>06/30/2017</u>	Page <u>10</u> of <u>27</u>
	LD AUMDED

NAME OF FILER
BAKERSFIELD CHAMBER OF COMMERCE POLITICAL ACTION COMMITTEE

I.D. NUMBER 1352944

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/24/2017	Payee Name: BRUCE FREEMAN FOR CITY COUNCIL 2017 Candidate Name: BRUCE FREEMAN City Council Member District 5 Jurisdiction: CITY OF BAKERSFIELD	Monetary Contribution Non-Monetary Contribution Independent		\$1,000.00	\$1,000.00	2017S: \$1,000.00
	■ Support	Expenditure				
5/3/2017	Payee Name: RUDY SALAS FOR ASSEMBLY 2018 Candidate Name: RUDY SALAS State Assembly Person	Monetary Contribution		\$2,500.00	\$2,500.00	2018P: \$2,500.00
	District 32 Jurisdiction: Assembly District	Nonmonetary Contribution				
	■ Support □ Oppose	Independent Expenditure				
5/3/2017	Payee Name: VIDAK FOR SENATE 2018 Candidate Name: JAMES ANDREW VIDAK State Senator	Monetary Contribution		\$300.00	\$300.00	2018P: \$300.00
	District 14 Jurisdiction: Senate	Nonmonetary Contribution				
	■ Support □ Oppose	Independent Expenditure				
2/21/2017	KERN COUNTY REPUBLICAN CENTRAL COMMITTEE (STATE)	Monetary Contribution		\$400.00	\$400.00	
		Nonmonetary Contribution				
	■ Support	Independent Expenditure				
			SUBTOTAL	·		

Type or print in ink.

Amounts may be rounded to whole dollars.

	SCHEDULE D (CONT.)
Statement covers period	CALIFORNIA 460
from01/01/2017	FORM 400
through $06/30/2017$	Page <u>11</u> of <u>27</u>

NAME OF FILER
BAKERSFIELD CHAMBER OF COMMERCE POLITICAL ACTION COMMITTEE

I.D. NUMBER 1352944

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/28/2017	Payee Name: VINCE FONG FOR ASSEMBLY 2018 Candidate Name: VINCE FONG State Assembly Person District 34 Jurisdiction: Assembly District	Monetary Contribution Non-Monetary Contribution		\$2,500.00	\$2,500.00	2018P: \$2,500.00
	■ Support □ Oppose	Independent Expenditure				
5/5/2017	Payee Name: BRUCE (IE) FREEMAN Candidate Name: BRUCE FREEMAN City Council Member District 5 Jurisdiction: CITY OF BAKERSFIELD	Monetary Contribution Nonmonetary	DIGITAL MEDIA PRODUCTION	\$993.75	\$18,046.56	2017S: \$6,179.49
	Support Oppose	Contribution Independent Expenditure				
5/5/2017	Payee Name: BRUCE (IE) FREEMAN Candidate Name: BRUCE FREEMAN City Council Member District 5 Jurisdiction: CITY OF BAKERSFIELD	Monetary Contribution Nonmonetary Contribution	DIGITAL VIDEO	\$200.00	\$18,046.56	2017S: \$6,179.49
	■ Support □ Oppose	Independent Expenditure				
5/5/2017	Payee Name: BRUCE (IE) FREEMAN Candidate Name: BRUCE FREEMAN City Council Member District 5	Monetary Contribution	DIGITAL ADS	\$500.00	\$18,046.56	2017S: \$6,179.49
	Jurisdiction: CITY OF BAKERSFIELD	Nonmonetary Contribution Independent Expenditure				
	Support Oppose		SUBTOTAL	-		

Type or print in ink.

Amounts may be rounded to whole dollars.

 $\begin{array}{c} \text{SCHEDULE D (CONT.)} \\ \text{Statement covers period} \\ \text{from} \quad \begin{array}{c} 01/01/2017 \\ \text{through} \quad 06/30/2017 \\ \end{array} \quad \begin{array}{c} \text{CALIFORNIA} \\ \text{FORM} \end{array} \quad \textbf{460} \\ \end{array}$

NAME OF FILER
BAKERSFIELD CHAMBER OF COMMERCE POLITICAL ACTION COMMITTEE

I.D. NUMBER 1352944

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/8/2017	Payee Name: BRUCE (IE) FREEMAN Candidate Name: BRUCE FREEMAN City Council Member District 5 Jurisdiction: CITY OF BAKERSFIELD	Monetary Contribution Non-Monetary Contribution Independent Expenditure	DESIGN FOR MAILER	\$750.00	\$18,046.56	2017S: \$6,179.49
	■ Support □ Oppose	Experialitate				
5/8/2017	Payee Name: BRUCE (IE) FREEMAN Candidate Name: BRUCE FREEMAN City Council Member District 5	Monetary Contribution	MAILER	\$5,069.46	\$18,046.56	2017S: \$6,179.49
	Jurisdiction: CITY OF BAKERSFIELD	Nonmonetary Contribution				
	■ Support □ Oppose	Independent Expenditure				
5/10/2017	Payee Name: BRUCE (IE) FREEMAN Candidate Name: BRUCE FREEMAN City Council Member District 5	Monetary Contribution	RADIO AD AND BUYS	\$2,500.00	\$18,046.56	2017S: \$6,179.49
	Jurisdiction: CITY OF BAKERSFIELD	Nonmonetary Contribution				
	■ Support □ Oppose	Independent Expenditure				
5/10/2017	Payee Name: BRUCE (IE) FREEMAN Candidate Name: BRUCE FREEMAN City Council Member	Monetary Contribution	DIGITAL MEDIA PRODUCTION	\$187.94	\$18,046.56	2017S: \$6,179.49
	District 5 Jurisdiction: CITY OF BAKERSFIELD	Nonmonetary Contribution				
		Independent				
	■ Support □ Oppose	Expenditure				
			SUBTOTAL			

Type or print in ink.

Amounts may be rounded to whole dollars.

	SCHEDULE	D (CONT.
Statement covers period	CALIFORNIA	160
from01/01/2017	FORM	+00
through $06/30/2017$	Page 13 of	<u>27</u>
	I D NIIMBER	

NAME OF FILER
BAKERSFIELD CHAMBER OF COMMERCE POLITICAL ACTION COMMITTEE

I.D. NUMBER 1352944

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/10/2017	Payee Name: BRUCE (IE) FREEMAN Candidate Name: BRUCE FREEMAN City Council Member District 5	Monetary Contribution	DIGITAL ADS	\$100.00	\$18,046.56	2017S: \$6,179.49
	Jurisdiction: CITY OF BAKERSFIELD	Non-Monetary Contribution				
	■ Support □ Oppose	Independent Expenditure				
5/19/2017	Payee Name: BRUCE (IE) FREEMAN Candidate Name: BRUCE FREEMAN City Council Member	Monetary Contribution	DIGITAL MEDIA PRODUCTION	\$148.44	\$18,046.56	2017S: \$6,179.49
	District 5 Jurisdiction: CITY OF BAKERSFIELD	Nonmonetary Contribution				
	■ Support	Independent Expenditure				
5/19/2017	Payee Name: BRUCE (IE) FREEMAN Candidate Name: BRUCE FREEMAN City Council Member	Monetary Contribution	DIGITAL MEDIA PRODUCTION	\$439.06	\$18,046.56	2017S: \$6,179.49
	District 5 Jurisdiction: CITY OF BAKERSFIELD	Nonmonetary Contribution				
	Support Oppose	Independent Expenditure				
5/19/2017	Payee Name: BRUCE (IE) FREEMAN Candidate Name: BRUCE FREEMAN City Council Member	Monetary Contribution	DIGITAL MEDIA PRODUCTION	\$98.44	\$18,046.56	2017S: \$6,179.49
	District 5 Jurisdiction: CITY OF BAKERSFIELD	Nonmonetary Contribution				
	■ Support □ Oppose	Independent Expenditure				
			SUBTOTAL	_		

Type or print in ink.

Amounts may be rounded to whole dollars.

	SCHEDULE D (CONT.)
Statement covers period CALIFORNIA FORM	
from $01/01/2017$	FORM 400
through <u>06/30/2017</u>	Page <u>14</u> of <u>27</u>

NAME OF FILER
BAKERSFIELD CHAMBER OF COMMERCE POLITICAL ACTION COMMITTEE

I.D. NUMBER 1352944

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/19/2017	Payee Name: BRUCE (IE) FREEMAN Candidate Name: BRUCE FREEMAN City Council Member District 5 Jurisdiction: CITY OF BAKERSFIELD	Monetary Contribution Non-Monetary Contribution Independent	DIGITAL MEDIA PRODUCTION	\$234.38	\$18,046.56	2017S: \$6,179.49
	■ Support	Expenditure				
5/19/2017	Payee Name: BRUCE (IE) FREEMAN Candidate Name: BRUCE FREEMAN City Council Member	Monetary Contribution	DIGITAL MEDIA PRODUCTION	\$165.63	\$18,046.56	2017S: \$6,179.49
	District 5 Jurisdiction: CITY OF BAKERSFIELD	Nonmonetary Contribution				
	■ Support □ Oppose	Independent Expenditure				
5/24/2017	Payee Name: BRUCE (IE) FREEMAN Candidate Name: BRUCE FREEMAN City Council Member	Monetary Contribution	DIGITAL ADS	\$165.63	\$18,046.56	2017S: \$6,179.49
	District 5 Jurisdiction: CITY OF BAKERSFIELD	Nonmonetary Contribution				
	Support Dppose	Independent Expenditure				
5/30/2017	Payee Name: BRUCE (IE) FREEMAN Candidate Name: BRUCE FREEMAN City Council Member	Monetary Contribution	DIGITAL ADS	\$82.81	\$18,046.56	2017S: \$6,179.49
	District 5 Jurisdiction: CITY OF BAKERSFIELD	Nonmonetary Contribution				
		Independent Expenditure				
	■ Support □ Oppose	Expenditure				
			SUBTOTAL			

Type or print in ink.

Amounts may be rounded to whole dollars.

	SCHEDULE D (CONT.)
Statement covers period CALIFORNIA FORM	
from $01/01/2017$	FORM 400
through <u>06/30/2017</u>	Page <u>15</u> of <u>27</u>

NAME OF FILER
BAKERSFIELD CHAMBER OF COMMERCE POLITICAL ACTION COMMITTEE

I.D. NUMBER 1352944

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
6/2/2017	Payee Name: BRUCE (IE) FREEMAN Candidate Name: BRUCE FREEMAN City Council Member District 5	Monetary Contribution	DIGITAL ADS	\$132.81	\$18,046.56	2017S: \$6,179.49
	Jurisdiction: CITY OF BAKERSFIELD	Non-Monetary Contribution				
	Support Oppose	Independent Expenditure				
6/5/2017	Payee Name: BRUCE (IE) FREEMAN Candidate Name: BRUCE FREEMAN City Council Member	Monetary Contribution	DIGITAL ADS	\$32.81	\$18,046.56	2017S: \$6,179.49
	District 5 Jurisdiction: CITY OF BAKERSFIELD	Nonmonetary Contribution				
	Support Oppose	Independent Expenditure				
6/7/2017	Payee Name: BRUCE (IE) FREEMAN Candidate Name: BRUCE FREEMAN City Council Member	Monetary Contribution	DIGITAL ADS	\$231.54	\$18,046.56	2017S: \$6,179.49
	District 5 Jurisdiction: CITY OF BAKERSFIELD	Nonmonetary Contribution				
	■ Support	Independent Expenditure				
	Сиррол Суросс	Monetary				
		Contribution Nonmonetary				
		Contribution Independent				
	Support Oppose	Expenditure				
			SUBTOTAL	\$24,746.56		

Schedule E Payments Made

Type or print in ink.

Amounts may be rounded to whole dollars.

	SCHEDULE E
Statement covers period	CALIFORNIA 460
from <u>01/01/2017</u>	FORM 400
through <u>06/30/2017</u>	Page <u>16</u> of <u>27</u>
	I.D. NUMBER 1352944

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

BAKERSFIELD CHAMBER OF COMMERCE POLITICAL ACTION COMMITTEE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	0	PR	DESCRIPTION OF PAYMENT	AMOUNT PAID
BRUCE FREEMAN FOR CITY COUNCIL 2017 Bakersfield, CA 93311	СТВ				\$1,000.00
Committee ID: 1394672					
RUDY SALAS FOR ASSEMBLY 2018 Bakersfield, CA 93304	СТВ				\$2,500.00
Committee ID: 1393439					
VIDAK FOR SENATE 2018 Willows, CA 95988	СТВ				\$300.00
Committee ID: 1373825					

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.)	\$32,109.34
2. Unitemized payments made this period of under \$100.	\$0.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$0.00
4. Total payments made this period. (Add lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	\$32,109.34

Type or print in ink.

Amounts may be rounded to whole dollars.

	SCHEDULE E (CONT.)
Statement covers period	CALIFORNIA 160
from01/01/2017	FORM 400
through <u>06/30/2017</u>	Page <u>17</u> of <u>27</u>
	I.D. NUMBER 1352944

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

BAKERSFIELD CHAMBER OF COMMERCE POLITICAL ACTION COMMITTEE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
KERN COUNTY REPUBLICAN CENTRAL COMMITTEE (STATE) Bakersfield, CA 93309	СТВ		\$400.00
Committee ID: 770873			
VINCE FONG FOR ASSEMBLY 2018 Bakersfield, CA 95814	СТВ		\$2,500.00
Committee ID: 1393014			
RUSSO MCGARTY AND ASSOCIATES INC. Sacramento, CA 95814	CNS		\$2,025.00
THE MONACO GROUP Santa Ana, CA 92705	IND	MAILER, SUPPORTING BRUCE FREEMAN, BAKERSFIELD CITY COUNCIL, WARD 5; SEE SCHEDULE G	\$5,113.86
KARI KEANE DESIGN Rocklin, CA 95765	IND	DIGITAL AD DESIGN, SUPPORTING BRUCE FREEMAN, BAKERSFIELD CITY COUNCIL, WARD 5	\$150.00

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

Type or print in ink.

Amounts may be rounded to whole dollars.

	SCHEDULE E (CONT.)
Statement covers period	CALIFORNIA 460
from01/01/2017	FORM 400
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	I D NUMBER

1352944

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

BAKERSFIELD CHAMBER OF COMMERCE POLITICAL ACTION COMMITTEE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
KARI KEANE DESIGN Rocklin, CA 95765	IND	DESIGN FOR MAILER, SUPPORTING BRUCE FREEMAN, BAKERSFIELD CITY COUNCIL, WARD 5	\$750.00
THE MONACO GROUP Santa Ana, CA 92705	IND	MAILER, SUPPORTING BRUCE FREEMAN, BAKERSFIELD CITY COUNCIL, WARD 5; SEE SCHEDULE G	\$5,069.46
KARI KEANE DESIGN Rocklin, CA 95765	IND	DESIGN FOR MAILER, SUPPORTING BRUCE FREEMAN, BAKERSFIELD CITY COUNCIL, WARD 5	\$750.00
RUSSO MCGARTY AND ASSOCIATES INC. Sacramento, CA 95814		REIMBURSED EXPENSES; SEE SCHEDULE G	\$1,030.58
GREAT VALLEY SERVICES BAKERSFIELD, CA 93308	IND	RADIO AD AND BUYS SUPPORTING BRUCE FREEMAN, BAKERSFIELD CITY COUNCIL, WARD 5	\$2,500.00

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

Type or print in ink.

Amounts may be rounded to whole dollars.

	SCHEDULE E (CONT.)
Statement covers period	CALIFORNIA 160
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

BAKERSFIELD CHAMBER OF COMMERCE POLITICAL ACTION COMMITTEE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
PROVIDENCE STRATEGIC CONSULTING, INC. Bakersfield, CA 93301	IND	DIGITAL ADS SUPPORTING BRUCE FREEMAN, BAKERSFIELD CITY COUNCIL, WARD 5	\$32.81
PROVIDENCE STRATEGIC CONSULTING, INC. Bakersfield, CA 93301	IND	DIGITAL ADS SUPPORTING BRUCE FREEMAN, BAKERSFIELD CITY COUNCIL, WARD 5	\$82.81
PROVIDENCE STRATEGIC CONSULTING, INC. Bakersfield, CA 93301	PRO		\$119.69
PROVIDENCE STRATEGIC CONSULTING, INC. Bakersfield, CA 93301	IND	DIGITAL ADS SUPPORTING BRUCE FREEMAN, BAKERSFIELD CITY COUNCIL, WARD 5	\$132.81
PROVIDENCE STRATEGIC CONSULTING, INC. Bakersfield, CA 93301	IND	DIGITAL ADS SUPPORTING BRUCE FREEMAN, BAKERSFIELD CITY COUNCIL, WARD 5	\$148.44

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

Type or print in ink.

Amounts may be rounded to whole dollars.

	SCHEDULE E (CONT.)
Statement covers period	CALIFORNIA 460
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1352944

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

BAKERSFIELD CHAMBER OF COMMERCE POLITICAL ACTION COMMITTEE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
PROVIDENCE STRATEGIC CONSULTING, INC. Bakersfield, CA 93301	IND	DIGITAL ADS SUPPORTING BRUCE FREEMAN, BAKERSFIELD CITY COUNCIL, WARD 5	\$165.63
PROVIDENCE STRATEGIC CONSULTING, INC. Bakersfield, CA 93301	IND	DIGITAL ADS SUPPORTING BRUCE FREEMAN, BAKERSFIELD CITY COUNCIL, WARD 5	\$165.63
PROVIDENCE STRATEGIC CONSULTING, INC. Bakersfield, CA 93301	IND	DIGITAL ADS SUPPORTING BRUCE FREEMAN, BAKERSFIELD CITY COUNCIL, WARD 5	\$231.54
PROVIDENCE STRATEGIC CONSULTING, INC. Bakersfield, CA 93301	IND	DIGITAL ADS SUPPORTING BRUCE FREEMAN, BAKERSFIELD CITY COUNCIL, WARD 5	\$287.94
PROVIDENCE STRATEGIC CONSULTING, INC. Bakersfield, CA 93301	PRO		\$1,187.51

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

Type or print in ink.

Amounts may be rounded to whole dollars.

	SCHEDULE E (CONT.)
Statement covers period	CALIFORNIA 160
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

BAKERSFIELD CHAMBER OF COMMERCE POLITICAL ACTION COMMITTEE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER L.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
PROVIDENCE STRATEGIC CONSULTING, INC. Bakersfield, CA 93301	IND	DIGITAL ADS SUPPORTING BRUCE FREEMAN, BAKERSFIELD CITY COUNCIL, WARD 5	\$1,693.75
PROVIDENCE STRATEGIC CONSULTING, INC. Bakersfield, CA 93301	IND	DIGITAL ADS SUPPORTING BRUCE FREEMAN, BAKERSFIELD CITY COUNCIL, WARD 5	\$439.06
PROVIDENCE STRATEGIC CONSULTING, INC. Bakersfield, CA 93301	IND	DIGITAL ADS SUPPORTING BRUCE FREEMAN, BAKERSFIELD CITY COUNCIL, WARD 5	\$98.44
PROVIDENCE STRATEGIC CONSULTING, INC. Bakersfield, CA 93301	IND	DIGITAL ADS SUPPORTING BRUCE FREEMAN, BAKERSFIELD CITY COUNCIL, WARD 5	\$234.38
NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP Sacramento, CA 95814	PRO		\$3,000.00

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$32,109.34

Schedule F **Accrued Expenses (Unpaid Bills)**

BAKERSFIELD CHAMBER OF COMMERCE POLITICAL ACTION COMMITTEE

NAME OF FILER

Type or print in ink. Amounts may be rounded to whole dollars.

	OOHLDOLL				
Statement covers period from $\frac{01/01/2017}{}$	CALIFORNIA 460				
through <u>06/30/2017</u>	Page <u>22</u> of <u>27</u>				
	I.D. NUMBER 1352944				

SEE INSTRUCTIONS ON REVERSE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

	ů ,				• •
CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
RUSSO MCGARTY AND ASSOCIATES INC. Sacramento, CA 95814	CNS	\$0.00	\$5,280.00	\$0.00	\$5,280.00
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$0.00	\$5,280.00	\$0.00	\$5,280.00

Schedule F Summary

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for	
	INCURRED TOTALS \$5,280.00

2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on

3. Net change this period.	(Subtract Line 2 from Line 1. Enter the difference here and
on the Summary Page,	Column A, Line 9.)

May be a negative number.

Schedule G Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

BAKERSFIELD CHAMBER OF COMMERCE POLITICAL ACTION COMMITTEE

Type or print in ink.

Amounts may be rounded to whole dollars.

	SCHEDULE G
Statement covers period	CALIFORNIA A CO
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through _06/30/2017	Page <u>23</u> of <u>27</u>
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NAME OF AGENT OR INDEPENDENT CONTRACTOR RUSSO MCGARTY AND ASSOCIATES INC.

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. MBR member communications CMP campaign paraphernalia/misc. RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals FND fundraising events POL polling and survey research IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor VOT voter registration LEG legal defense PRO professional services (legal, accounting) campaign literature and mailings PRT print ads WEB information technology costs (internet, email) * Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR
(I) COMMITTE, ALSO ENTER LD. NUMBER)

SOUTHWEST AIRLINES CO.

TRS

TRS

S22.95

S325.95

TRS

TRS

S4 DESCRIPTION OF PAYMENT

AMOUNT PAID

SOUTHWEST AIRLINES CO.

Dallas, TX 75235

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$525.95

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Schedule G Payments Made by an Agent or Independent **Contractor (on Behalf of This Committee)**

BAKERSFIELD CHAMBER OF COMMERCE POLITICAL ACTION COMMITTEE

Type or print in ink. Amounts may be rounded to whole dollars.

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SCHEDULE G

NAME OF AGENT OR INDEPENDENT CONTRACTOR THE MONACO GROUP

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. MBR member communications CMP campaign paraphernalia/misc. RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs candidate filing/ballot fees FIL PHO phone banks TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals FND fundraising events POL polling and survey research IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor LEG legal defense PRO professional services (legal, accounting) VOT voter registration campaign literature and mailings PRT print ads WEB information technology costs (internet, email) * Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
US POST MASTER Bakersfield, CA 93309	POS			\$1,823.01
US POST MASTER Bakersfield, CA 93309	POS			\$1,995.89

Attach additional information on appropriately labeled continuation sheets.

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC

TOTAL* \$3818.90

Schedule H -	
Loans Made to	Others*

Type or print in ink.

	SCHEDULE H
Statement covers period	CALIFORNIA 460
om 01/01/2017	FORM 40U

Loans Made to Others*		Amounts may be rounded to whole dollars.			from01/01/20	017	CALIFORNIA 460		
SEE INSTRUCTIONS ON REVERSE					through <u>06/30/20</u>	017	Page <u>25</u>	of <u>27</u>	
NAME OF FILER BAKERSFIELD CHAMBER OF COMMERCE POLI	ITICAL ACTION COMMITTEE						I.D. NUMBER 1352944		
FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT LOANED THIS PERIOD	(c) REPAYMENT OR FORGIVENESS THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE	
				PAID				CALENDAR YEAR	
				FORGIVEN		RATE %		PER ELECTION**	
					DATE DUE		DATE INCURRED		
				PAID				CALENDAR YEAR	
				FORGIVEN		RATE		PER ELECTION**	
					DATE DUE		DATE INCURRED		
Loans that are contributions to another candidate must also be summarized on Schedule D. Loans also be reported on Schedule E.	forgiven must	SUBTOTALS							
						(Enter (e) on Schedule I, Line 3)			
Schedule H Summary									
1. Loans made this period(Total Column (b) plus unitemized loans								** If Required	
Payments received on loans Total Column (c) plus unitemized paym									
3. Net change this period. (Subtract Line Enter the net here and on the Summan	e 2 from Line 1.)y Page, Column A, Line 7.)				NET (May be a ne	gative number)			

Schedule I Miscellaneous Increases to Cash

Type or print in ink. Amounts may be rounded

SCHEDULE I Statement covers period

		hole dollars.		01/01/2017	FORM 46		
EE INSTRUCTION	IS ON REVERSE		through	06/30/2017	Page ²⁶	of <u>27</u>	
IAME OF FILER	HAMBER OF COMMERCE POLITICAL ACTION COMMITTEE		1		I.D. NUMBER 1352944		
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESC	CRIPTION OF	RECEIPT	AMOU INCREASE	JNT OF TO CASH	
/13/2017	GREATER BAKERSFIELD CHAMBER OF COMMERCE BAKERSFIELD, CA 93303	DEPOSIT MADE IN ER	RROR		\$19,602.01		
/7/2017	GREATER BAKERSFIELD CHAMBER OF COMMERCE BAKERSFIELD, CA 93303	REVERSAL OF DEPOS	SIT MADE IN	V ERROR	(\$19,602.01)		
Attach add	ditional information on appropriately labeled continuation sheets.			SUBTOT	AL \$0.00		
Schedule I	•						
	cash of \$100 or more this period			\$0.00	_		
	increases to cash under \$100 this period.			\$19.34	_		
	nterest received this period on loans made to others. (Schedule H, Column			\$0.00	_		
	llaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here a Page, Line 14.)		ТО	TAL \$19.34			

Memo Reference: INC238 RESTRICTED USE ACCOUNT		
RESTRICTED USE ACCOUNT		
Memo Reference: INC260		
ALL PURPOSE ACCOUNT		
r D.C. Diggs		
Memo Reference: INC261 RESTRICTED USE ACCOUNT		
RESTRICTED USE ACCOUNT		
Memo Reference: INC268 RESTRICTED USE ACCOUNT		
RESTRICTED USE ACCOUNT		